IN THE CLAIMS:

Please cancel Claims 1-2 without prejudice.

Please amend Claims 3, 6 and 10-11 as indicated below.

- A4
- 3. (Amended) The method of Claim 23, wherein said administration is achieved through any one or more of intravenous (IV), intramuscular (IM), subcutaneous (SC), intraperitoneal (IP), intrathecal or topical administration.
- A5
- 6. (Amended) The method of Claim 23, wherein said cell-wall active antibiotic is a β-lactam or a glycopeptide.
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- 10. (Amended) The method of Claim 23, wherein said staphylococcal infection is mediated by at least one S. aureus microorganism.
- 11. (Amended) The method of Claim 23, wherein said staphylococcal infection is mediated by at least one coagulase-negative staphylococcal microorganism.

Please add new Claims 23-28.

23 -23. (New) A method of treating a staphylococcal infection in a mammal while suppressing the formation of antibiotic-resistant staphylococcal strains, said method comprising simultaneously administering lysostaphin and a cell-wall active antibiotic, wherein the lysostaphin is present in an amount effective in treating, in a mammal, a staphylococcal infection that is not lysostaphin-resistant and wherein the cell-wall active antibiotic is present in an amount effective in treating, in a mammal, a staphylococcal infection that is not resistant to the cell-wall active antibiotic.

(New) A method of treating a staphylococcal infection in a mammal while suppressing the formation of antibiotic-resistant staphylococcal strains, comprising simultaneously administering an anti-staphylococcal agent other than a cell-wall active antibiotic and a cell-wall active antibiotic, wherein the anti-staphylococcal agent is present in